

MULTNOMAH COUNTY CONTRACT APPROVAL FORM

Check all that apply

<input checked="" type="checkbox"/> County Attorney email approval attached	Contract Number: <u>4710000073</u>
<input type="checkbox"/> Retro Memo attached	Amendment Number: <u>1</u>
<input type="checkbox"/> Proof of insurance attached	Vendor Number: <u>12052</u>
<input type="checkbox"/> EEO Exhibit 5 attached (contracts over \$75,000)	Date: <u>04/19/2011</u>
<input type="checkbox"/> Expenditure <input type="checkbox"/> Revenue <input checked="" type="checkbox"/> Non-Financial Agreement <input type="checkbox"/> Inter-Departmental	

CAF Purpose

New Contract Renewal Date Change Funding Change Service Change

Department: <u>Community Services</u>	Division/Program: <u>Land Use and Transportation</u>
Originator: <u>Kim Peoples</u>	Phone: <u>988-5050 x26797</u> Mail Stop: <u>#425/2nd</u>
Contact: <u>Cathey Kramer</u>	Phone: <u>988-5050 x22589</u> Mail Stop: <u>#425/2nd</u>

Contract/Amendment Procurement Details

Procurement No.(s): <u>461301f</u>	Effective Date: _____	End Date: _____
Exemption or Citation No.(s): _____	Effective Date: _____	End Date: _____
Check all that apply to contractor: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> ESB <input type="checkbox"/> QRF State Cert No.: _____ <input type="checkbox"/> Non-Profit <input checked="" type="checkbox"/> N/A		
Contractor: <u>Oregon Dept. of Transportation</u>		
Address: <u>123 NW Flanders St.</u>	<input type="checkbox"/> Lump Sum \$ _____	<input type="checkbox"/> Due on Receipt
City/State/Zip: <u>Portland OR 97209-4037</u>	<input type="checkbox"/> Monthly \$ _____	<input type="checkbox"/> Net 30
Telephone: <u>(503) 731-8559 (Ted Miller)</u>	<input type="checkbox"/> Quarterly \$ _____	<input type="checkbox"/> Other
	<input type="checkbox"/> Other \$ _____	N/A
Contract Effect Date: <u>10/15/2006</u>	Term Date: <u>3/13/2011</u>	
Amend Effect Date: <u>5/12/2011</u>	New Term Date: <u>4/17/2021</u>	<input type="checkbox"/> Price Agreement or Requirements Funding Information:
Original Contract Amount: \$ _____	Original PA/Requirements Amt: \$ _____	
Total Amount Previous Amend: \$ _____	Total Amount Previous Amend: \$ _____	
Amount of Amendment: \$ _____	Requirements Amount Amend: \$ _____	
Total Amount of Agreement: \$ <u>0</u>	Total Amount of PA/Requirements: \$ _____	

Required Signatures

Dept Director or Designee: _____ Date: _____

County Chair: _____ Date: _____

Vendor Contact Information

Changed from Previous CAF

Name: <u>Theodore (Ted) Miller</u>	Title: <u>Region 1 Operations Manager</u>	email: <u>Theodore.C.Miller@odot.state.or.us</u>
Name: _____	Title: _____	email: _____
Name: _____	Title: _____	email: _____

Contract/Amendment Description Or Comments

Amendment No. 1 to Flexible Service Agreement (IGA) with Oregon Department of Transportation (ODOT). This is a multi-agency agreement for equipment and services which allows the exchange of transportation materials, equipment, and services among the signed parties. This is a Non-financial Agreement (NFA)

(WBS: ROADM9GO1)